MEDIA RELEASE

FOR IMMEDIATE RELEASE

Contact: Kristin Prelipp, Communications Manager and

Public Information Officer

kprelipp@orangecountync.gov or 919-245-2462



Orange County COVID-19 Updated Data March 19, 2021

HILLSBOROUGH, N.C. March 19, 2021 -- The Orange County Health Department has provided the following information about COVID-19 cases in Orange County as of 10:00 a.m. today:

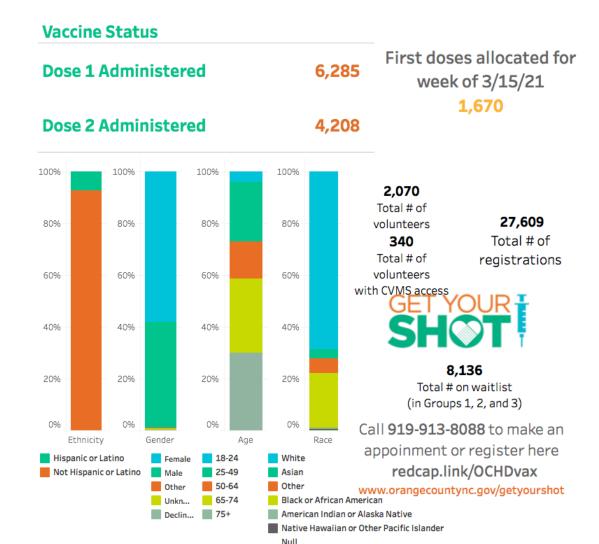
TOTAL CASES: 7,867 TOTAL DEATHS: 98



COVID-19 VACCINE UPDATE



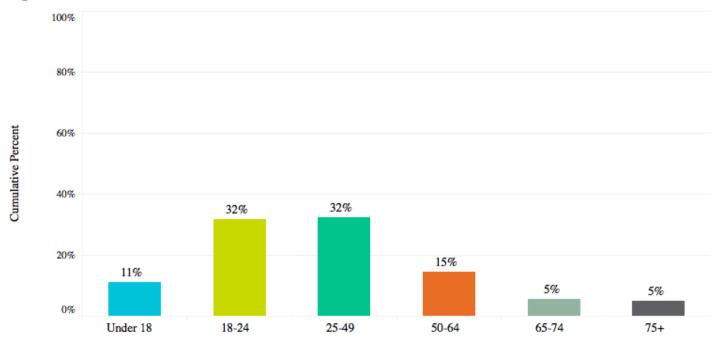
Last updated March 15, 2021 at aprox. 12:00 PM



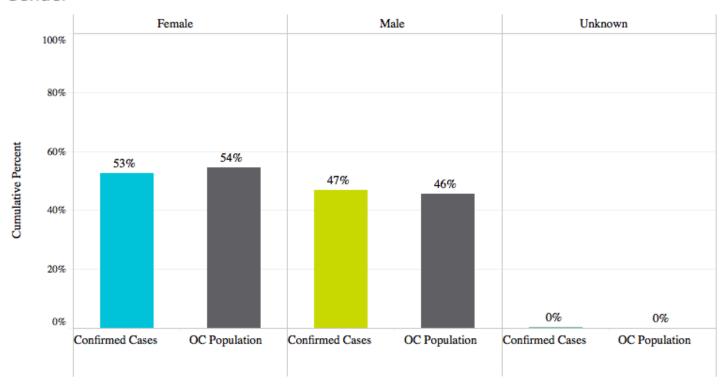
Declined to State
Unknown

Confirmed Orange County Cases by:

Age



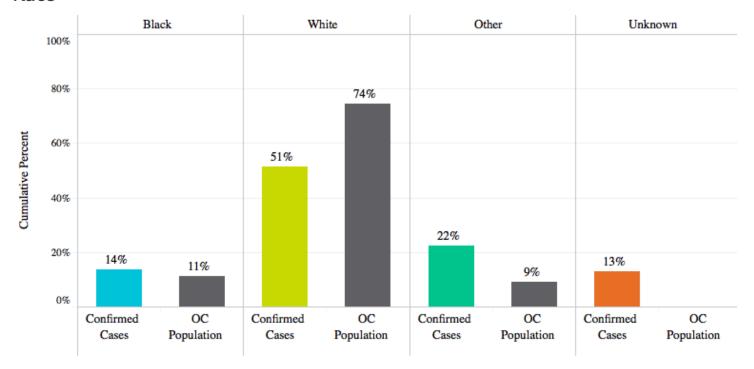
Gender



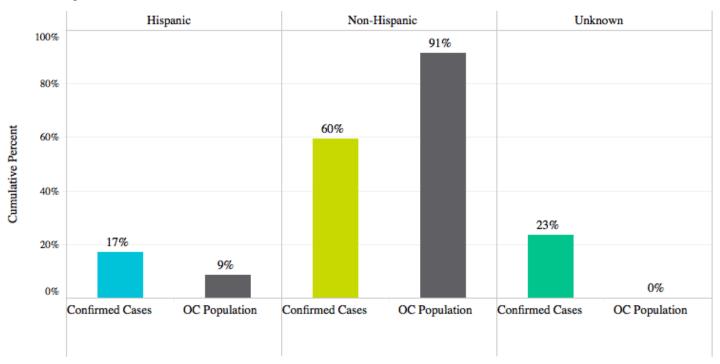
Data featured in this dashboard is based on the North Carolina COVID-19 Surveillance System (NC COVID), which publishes laboratory-confirmed COVID-19 cases, deaths, and other demographic information. Publishing of NC COVID data is one day behind the publishing of the COVID-19 North Carolina Dashboard. As such, daily counts of confirmed cases may differ slightly.

Confirmed Orange County Cases by:

Race



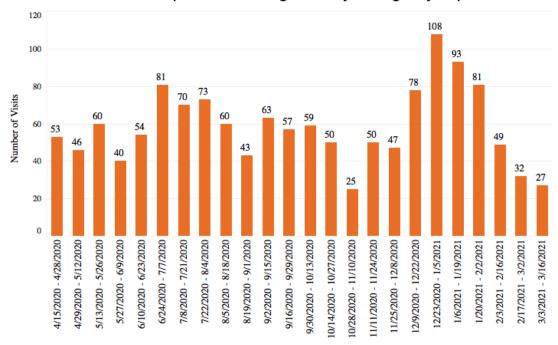
Ethnicity



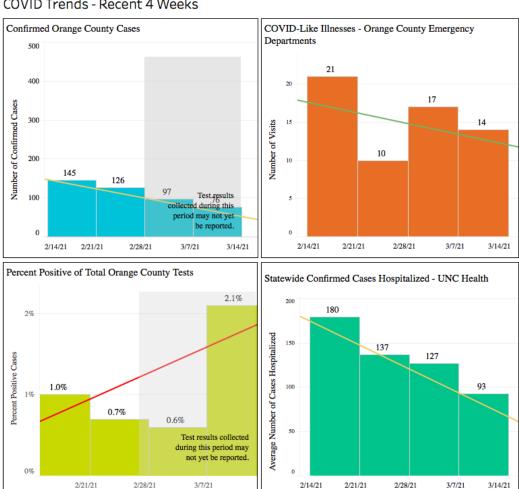
^{*}Race and ethnicity data is missing for approximately 15% to 25% of all confirmed resident cases.

The Orange County Health Department uses the COVID-19 North Carolina Dashboard to update daily case counts and deaths Monday through Friday. Demographic data from NC COVID is updated on Tuesdays and Thursdays. For county case data on Saturdays and Sundays, visit the COVID-19 North Carolina Dashboard at: https://covid19.ncdhhs.gov/dashboard

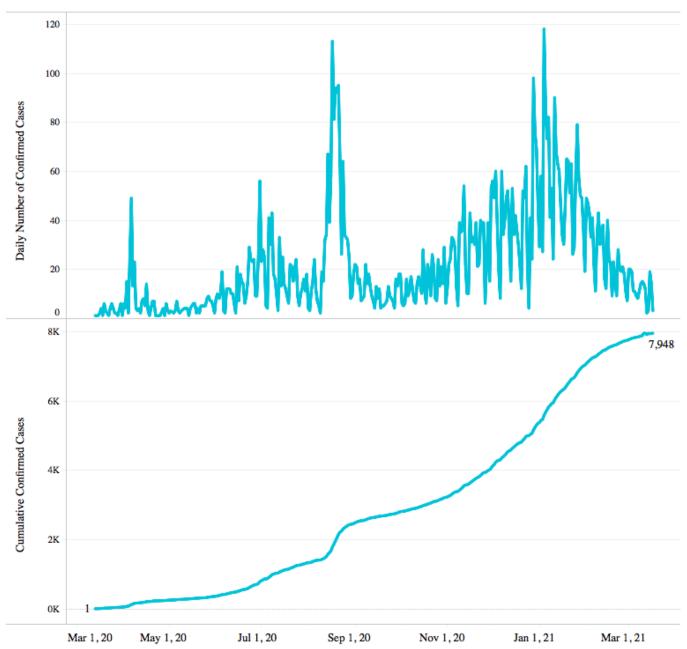
COVID-Like Illnesses Reported to Orange County Emergency Departments



COVID Trends - Recent 4 Weeks



Daily and Cumulative Confirmed Orange County Cases



Demographic groups with very small numbers have been suppressed to protect resident confidentiality. Race and ethnicity data is missing for approximately 15% to 25% of all confirmed cases. Additionally, the dashboard only includes data from residents that have been tested. As a result, this data should not be used to make generalizations about infection rates for any segment of the resident population.